

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | I S | 66621 | 7/27 |
| O.I.P.E. CLASSIFIER | | | 8-1-00 |
| FORMALITY REVIEW | C M | 71632 | 9/13/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final Original | Date |
|-------|----------------|------|
| 1 | 1/4/02 | |
| 2 | 2/28/03 | |
| 3 | 12/27/03 | |
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| Claim | Final Original | Date |
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| Claim | Final Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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